



# ADHD in Adults

## GP Update, 2026

### Frequently Asked Questions, with Dr Simone Gonzo

**Q: How long should a patient be treated with psychostimulants? When can a GP consider discontinuing them?**

**A:** There is no absolute upper limit for treatment duration. Psychostimulants can be safely used across the lifespan, even into the 60s, with appropriate monitoring.

- Life stage reviews are recommended: finishing school/university, starting a family, major lifestyle changes.
- Patients may trial periods off medication if they have developed effective non-pharmacological coping strategies.
- Specialist input (psychiatry, cardiology) is recommended when comorbidities exist.

**Q: How do the guidelines (e.g. ADHD Guidelines from AAADPA) influence GP practice?**

**A:** Guidelines provide a framework, but assessment is rarely linear. GPs should:

- Take a full medical, psychological, and developmental history
- Exclude mimicking conditions (thyroid, epilepsy, substance use, personality disorders)
- Consider input from psychologists or psychiatrists if needed
- Use rating scales as part of a comprehensive assessment

**Q: How do GPs choose the right stimulant?**

**A:** Start with familiar options unless contraindicated.

- Most GPs start with short-acting dexamphetamine or methylphenidate (Ritalin).
- Dose 1–3 times per day, usually morning and lunch to avoid evening stimulant effects.
- Adjust based on tolerance and response:
  - If effective but inconvenient, consider long-acting formulations
  - If side effects occur, consider non-stimulants (clonidine, atomoxetine, or antidepressants depending on symptoms)

**Q: What monitoring and review are recommended?**

**A:**

- Regular clinical reviews for efficacy, side effects, and comorbidities
- Periodic life stage reassessment for ongoing need
- Collaboration with specialists as needed for complex cases

**Q: Are there any special considerations for starting treatment in adults?**

**A:** Adult patients may present with self-reported symptoms, past school reports, or caregiver input. Ensure accurate diagnosis; sometimes requires blood tests, cardiology review, or specialist input.

## Where to next

-  For further learning, explore HealthCert's new ADHD in General Practice short course.
-  \$195, online, CPD accredited.
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